Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>10-27-2010</u>	Address:	56000 BLOCK SPRUCE LN.	
Case #:	24F32040		<u>ELKH</u> AR <u>T,IN</u>	
County:	<u>ELKHART</u>		<u>46514</u>	
Type of Laboratory Scizure (check one)		Seizure Location (check all that apply)		
Operation Chemic Dumpsi	al/Glassware/Equipment (only)	☐ Residence ☐ Outbuilding ☐ Vehicle	☐ Hotel/Motel ☐ Open No Structure ☐ Other:	
Items Found: Location (bedroom, kitchen, open air, etc)				
(check all that apply) Lithium/Ammonia Reaction(s): OPEN AIR				
Red Phosphorous/Iodine Reaction(s):				
☐ Flammable Solvents: OPEN AIR				
Water Reactive Metal (Lithium): OPEN AIR				
Anhydrous Ammonia:				
☐ Hydrochloric Acid Gas Generator(s):				
Corrosive Acid:				
Corrosive Base; OPEN AIR				
Other (item and location):				
Child under age 18 discovered (check one) ☐ Yes (number present) ☐ No *If yes, fax report to Child Protective Services		☐ Ephedrina ☐ Retail/Ma	Investigative Information ☐ Ephedrinc/Pscudoephedrinc Tracking Log ☐ Retail/Merchant Tip ☑ Other:ELKHART COUNTY SHERIFTS	
This report is to be faxed to the following agencies that serve the location:				
Fire Departs	ment: <u>FLKHART</u> FI <u>RE DEPT</u>	Fax: <u>574-</u> 293 <u>-8931</u>		
Health Department: ELKILART HEALTH		Fax: <u>(574) :</u> Fax:		
Child Protec	ction Service:	200	•	
For further information regarding this methamphetamine laboratory, contact Investigating Officer: B. WENTWORTH 7720 Phone 574-546-4900				

^{**} This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

^{***} This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.